

# Maryland SHIP "Health Action" Newsletter

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## New Sortable Stats Resource



CDC has created new data and analysis tools intended to serve as a resource for public health professionals to promote policy, support system and environmental changes, and improve health. Sortable Stats is an interactive data set composed of behavioral risk factors and health indicators.

Sortable Stats allows users to view, sort, and analyze data at state, regional and national levels; sort data by demographics and historical trends; view data in graphs, tables and maps; and easily export data to Excel spreadsheets and PowerPoint, or for use in other materials. By incorporating all of these valuable resources in one tool, Sortable Stats easily creates connections to additional information and provides guidance about how to best address numerous health challenges.

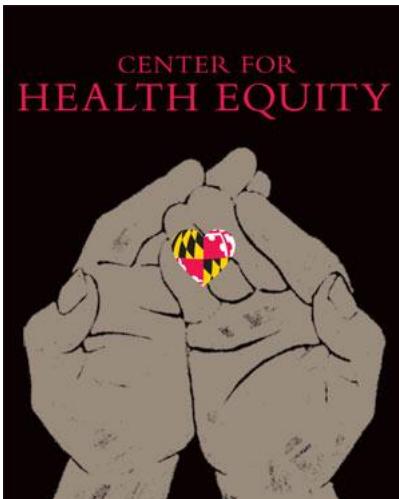
Click [here](#) for more information about Sortable Stats.

Click [here](#) to access this tool.

Click [here](#) to view the SHIP toolbox.

## Maryland Research Center Eliminates Health Disparities

According to various measures, Maryland is one of the highest performing states in the nation. However, despite the gains across the state, significant health disparities in healthcare and health outcomes continue to exist. Eleven of the top fifteen causes of death show a disparity in the mortality rate between African Americans and whites, with African Americans nearly three times more likely to die in infancy than whites. In order to address these disparities, the Maryland Center for Health Equity (M-CHE) was launched in 2010. Since its establishment, M-CHE has made enormous impacts including the creation of a framework for



eliminating racial and ethnic health disparities that incorporates community engagement, research, training, and the development of public policy that can be replicated on a state and national level. Using an interdisciplinary approach to health equity, the center places particular emphasis on working with students and the next generation of medical and public health professionals.

Click [here](#) to read the full story.

Click [here](#) for more information about health disparities in Maryland.

## May is High Blood Pressure Education Month



May is High Blood Pressure Education Month, and it's a good time to find out how to "make control your goal." High blood pressure, or hypertension, is a silent killer since it often has no signs or symptoms. High blood pressure can damage your health in many ways. For instance, it can harden the arteries causing a decrease in the flow of blood and oxygen to the heart and brain. This reduced flow can cause heart attacks, strokes, chest pain or heart failure.

Of the 67 million American adults who have high blood pressure, 16 million know that they have the condition and are receiving treatment, but their blood pressure still remains higher than it should be. Almost one in three Maryland residents ages 64 and younger and two in three older adults ages 65 and older, report having been told by a health care professional that they have high blood pressure.

For more information about blood pressure and health, click [here](#) to visit the CDC Blood Pressure website.

Click [here](#) to visit the Million Hearts website for more information about their partnership with Maryland DHMH.

View the [SHIP measure](#) and [tools](#) for reducing emergency department visits due to hypertension.

## Addressing Youth Suicide Through Evidence-Based Interventions

Suicide is a major preventable public health concern in the nation. In Maryland, the suicide rate was 8.7 per 100,000 population in 2010. It is the third leading cause of death for individuals under the age of 24. The suicide rate for individuals aged 15 to 24 was over 7 times the national rate for American Indians and Alaska Natives. For the same age group the suicide rate for individuals aged 15 to 24 was over 13 times greater than the national rate.



In order to address this devastating disparity, tribal leadership, in collaboration with the Johns Hopkins Center for American Indian Health (CAIH), developed the [Empowering Our Spirits initiative](#) to prevent suicide. One portion of the initiative is a program entitled A New Hope, a 2- to 4-hour intervention that has been adapted from an Emergency Room Intervention for Adolescent Females. The original initiative is an evidence-based program included in SAMHSA's National Registry of Evidence-based Programs and Practices and consists of a 20-minute video and a short workbook that youth work through with their families.

The original program has been culturally and linguistically adapted to target American Indian and Alaska Native youth. Research shows that after participation in this program youth demonstrated being less depressed. These findings suggest that the Empowering Our Spirits program demonstrates the commitment to using data to drive public health decision making and to address youth suicide by incorporating evidence-based prevention strategies with traditional expertise.

Click [here](#) to read the full story.

View the [SHIP measure](#) and [tools](#) for reducing the suicide rate.

**May is Healthy Vision Month**



glaucoma, and age-related macular degeneration have no early warning signs, making regular checkups important. Poor vision is a risk factor for elder falls. Across the state of Maryland, the [A Matter of Balance program](#) is being used and has been adapted to help those with poor vision.

For more information about A Matter of Balance, please call Maryland Access Point (MAP) at [410-313-5980](#).

Click [here](#) to access the National Eye Institute for Healthy Vision Month resources.

View the [SHIP measure](#) and [tools](#) for decreasing fall related deaths.

Healthy Vision Month is designated to elevate vision as a health priority for the nation by promoting the importance of early detection and treatment, as well as the use of proper eye safety practices, in order to prevent vision loss and blindness. Efforts are targeted toward spreading the word about the importance of eye health to seniors in all communities. Many common eye diseases like diabetic eye disease,